

**Behavioral Health Consumer Handbook**

Mark Bridenbaugh Chief Executive Officer 740-773-4366	David Schenkelberg, LPCC-S Chief Clinical Officer, Chief Privacy Officer 740-592-3091
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Administrative staff may be contacted at numbers indicated between 9 am and 4 pm Monday through Friday.

<p><b>Athens County</b> 90 Hospital Drive Athens, Ohio 45701 740-592-3091 Hours: 8 – 6 M, W 8-7 T,- Th; 8-5 Fri Tammy Stage, LPCC-S, Clinic Director, Client Rights Officer</p>	<p><b>Hocking County</b> 541 St. Rt. 664N, Suite C Logan, Ohio 43138 740-385-6594 Hours: M/W 9-8; T/Th/F 9-5 Krisi Pennington, LISW, Clinic Director, Client Rights Officer</p>	<p><b>Jackson County</b> 502 McCarty Lane Unit #5 Jackson, Ohio 45640 740-286-5245 Hours:8:30-4:30 M,T,W, F 8:30-7 Th David Weaver, LPCC-S Clinic Director, Client Rights Officer</p>	<p><b>Washington County</b> 2434 Rich Miller Lane, Suite F Belpre, Ohio 45714 740-423-8095 Hours: 8-6 M-Th; 9-5 Fri Adryanne Garrett, LISW Clinic Director, Client Rights Officer</p>	<p><b>Washington County</b> 10595 State Route 550 Vincent, Ohio 45784 740-445-5113 Hours: 8-4 M-F Jo Sanders LPC Director of Reach – Day Treatment program, Clients Rights officer</p>
<p><b>Washington County</b> 207 Colgate Drive Marietta, Ohio 45750 740-376-0930 Hours: M,T,W 8-7 Th 8-6 F 8-4 April Hehr, LPCC-S, LICDC Client Rights Officer</p>	<p><b>Perry County</b> 2541 Panther Drive New Lexington, Ohio 43764 740-342-4192 Hours: M-F 730-5 Wendy Starlin, LISW, BHC, Client Rights Officer</p>	<p><b>Athens County</b> 141 Columbus Road Athens, Ohio 45701 740-249-4318 Hours:8:30-4:30 M,T,W, F 8:30-7 Th Micki Lamb, LPCC-S Clinic Director, Client Rights Officer</p>	<p><b>Vinton County</b> 31891 State Route 93 North McArthur, Ohio 45651 740-596-5249 Hours: 8-5 M-F Jodi Jones, LPCC-S Clinic Director, Client Rights Officer</p>	<p><b>Gallia County</b> 8323 St Rt 7North Cheshire, OH 45620 740-428-5012 Hours: 8-4 M-F Jo Sanders LPC Director of Reach – Day Treatment program, Clients Rights officer</p>
<p><b>Athens County</b> 9 Kenny Drive Athens, Ohio 45701 740-592-3091 Hours: 8 – 5 M-Fri Brielle Clark, LISW, IECMH Coordinator, Clients Rights officer</p>	<p><b>Meigs County</b> 41865 Pomeroy Pike Pomeroy, Ohio 45769 740-992-0540 Hours: M-F 8-5 Shannon DeWeese, LISW, Clinic Director, Client Rights Officer</p>	<p><b>Jackson County</b> 500 Burlington Road, Suite 240 Jackson, Ohio 45640 740-286-5075 Hours:8-5M-F Jill Salmons, LISW-S Clinic Director, Client Rights Officer</p>	<p><b>Gallia County</b> 3086 St Rt 160 Gallipolis, Ohio 45631 740-446-5500 Hours: 8-8 Monday 8-5 T-F Amanda Knipp, LPCC-S Clinic Director, Client Rights Officer</p>	<p><b>Athens County</b> 14455 Kimberley Road Nelsonville, Ohio 45764 740-753-9656 Hours: 8-4 M-F Jo Sanders LPCC-S Director of Reach – Day treatment program, Clients Rights officer</p>

**24/7 Mental Health Crisis Services:** 740-593-3344 (Athens), 1-888-475-8484 Toll Free  
740-446-5500 (Gallipolis), 1-800-252-5554 Toll Free  
**988**

**TDD: 740-593-3344 (all counties)**

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Thank you for choosing Hopewell Health Centers as your mental health, primary care and/ or substance abuse provider. If you have any concerns about the services you receive or suggestions on how we could improve our services, please speak with your service provider, or the clinic director/client rights officer at your service site. We are committed to providing quality healthcare services, and your input is an important part of realizing this goal.

### OUR MISSION:

#### **To provide access to affordable, high quality, integrated health care for all.**

- **Quick, easy access to care.** Emergent care within 2 hours of first contact, urgent care within one workday, routine care within 10 workdays.
- **Psychiatric services for children and adults** are provided by board certified psychiatrists and advanced practice nurses.
- **State of the art treatment approaches** include trauma informed treatment; brief, solution-focused treatment; PCIT, TFCBT, DBT, EMDR and other interventions to treat emotional trauma, wraparound treatment approaches for adults and children with multiple needs, and 24/7 crisis intervention.
- **A 16-bed and a 13 bed residential crisis stabilization unit** assists those individuals at highest risk for psychiatric hospitalization.
- **Case Management Support for adults and children** provides community based services for individuals with multiple needs and severe mental, behavioral and/or emotional disabilities.
- **Youth Day Treatment Service (“REACH”)** treats youth 7-17 experiencing severe emotional and/or behavioral symptoms that seriously impair the youth’s capacity to function age-appropriately and adequately on a daily basis
- **Partnership with Courts and Law Enforcement – SAMI** (Substance abusing mentally ill) Court program, Drug court programs and jail diversion services for severely mentally ill individuals
- **Payeeship Services** for individuals with severe psychiatric disabilities who are unable to manage their finances independently.
- **Housing Assistance** for severely mentally disabled individuals.
- **Crisis Services** Provided 24/7 365 for anyone, regardless of residency who presents in our service area – a policy of our full crisis continuum is available upon request

#### **Behavioral Health Consumer Orientation**

Each person admitted shall receive an understandable orientation appropriate to his or her needs, including:

- A. An explanation of the
  1. Rights and responsibilities of the consumer;
  2. Grievance procedures
  3. Ways in which input is given regarding the quality of care, achievement of outcomes, and satisfaction with services.
- B. An explanation of HHC’s:
  1. Services and activities
  2. Expectations
  3. Hours of operation
  4. Access to after-hour services
  5. Code of ethics
  6. Confidentiality policy - For the purpose of continuity of care, I understand HHC will exchange essential treatment information with my other health treatment providers as well as my payment source(s).
  7. Requirements for follow-up with mandated clients, regardless of his or her discharge outcome.
- C. An explanation of any and all financial obligations, fees and financial arrangements for all HHC services.

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- D. Familiarization with the premises, including emergency exits and/or shelters, fire suppression equipment and first aid kits.
- E. Agency policies on the use of seclusion and restraint, tobacco use, legal/illegal drugs and weapons brought into the program
- F. Identification of the person responsible for service coordination.
- G. A copy of the rules for the program, including information about any restrictions the program may place on the client; events, behaviors or attitudes that may lead to the loss of rights or privileges, and the means by which the client may regain rights or privileges that have been restricted.
- H. Education regarding psychiatric advance directives, as needed.
- I. Identification of the purpose and process of the assessment.
- J. A description of how individualized services plans are developed, and the client's participation in the process.
- K. Information regarding transition criteria and procedures.
- L. Review of my service provider's Name, Areas of Competence, Professional Credentials and Supervised Nature of Work.
- M. How Hopewell works with clients regarding access to language services or when literacy is a potential barrier to treatment
- N. When applicable, an explanation of HHC's services and activities related to court ordered clients including
  1. Expectation for consistent court appearances.
  2. Identification of therapeutic interventions, including sanctions, incentives and administrative discharge criteria.

### **Rights and Responsibilities of the Consumer**

**Client Rights** – These rights are guaranteed by the Ohio Department of Mental Health and Addiction Services. If you feel one of your rights has been violated, please try to work this out with your service provider, his/her supervisor or the clinic director. If you feel none of these solutions is possible, contact the client rights officer at your service location (listed on the front of the handbook and posted in all waiting rooms). Your rights as a client are:

- (1) The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
- (2) The right to reasonable protection from physical, sexual or emotional abuse and inhumane treatment;
- (3) The right to receive services in the least restrictive, feasible environment;
- (4) The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person's participation;
- (5) The right to give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency;
- (6) The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it;
- (7) The right to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is immediate risk of physical harm to self or others;
- (8) The right to be informed and the right to refuse any unusual or hazardous treatment procedures;
- (9) The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms or sleeping areas;
- (10) The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations;
- (11) The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction;

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- (12) The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary;
- (13) The right to be informed of the reason for denial of a service;
- (14) The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws;
- (15) The right to know the cost of services;
- (16) The right to be verbally informed of all client rights, and to receive a written copy upon request;
- (17) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
- (18) The right to file a grievance;
- (19) The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;
- (20) The right to be informed of one's own condition; and,
- (21) The right to consult with an independent treatment specialist or legal counsel at one's own expense.

### **Rights and Responsibilities of the Resident**

#### **Crisis Unit Residential Rights**

- In addition to all of the rights specified in OhioMHAS 5122:2-1-02, the following rights are applicable to all adult residents of the CSU.
  - CRO – Gallia CSU  
Amanda Knipp, Clinical Director  
3086 State Route 160  
Gallipolis, OH 45631  
740-446-5500 Ext. 425
  - CRO – Athens Respite  
Margaret Sterling, Clinical Manger - Respite  
7696 Dairy Lane  
Athens, OH 45701  
740-592-2734
- (1) The right to be verbally informed of all resident rights in language and terms appropriate for the resident's understanding, prior to or at the time of residency, absent a crisis or emergency.
  - (2) The right to request a written copy of all resident rights and the grievance procedure
  - (3) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety consideration.
  - (4) The right to file a grievance.
  - (5) The right to be treated all times with courtesy and respect, and with consideration for personal dignity, autonomy and privacy.
  - (6) The right to receive services in the least restrictive, feasible environment.
  - (7) The right to receive humane services in a clean, safe, comfortable, welcoming, stable and supportive environment.
  - (8) The right to reasonable protection from physical, sexual and emotional abuse, neglect, and exploitation.
  - (9) The right to freedom from unnecessary or excessive medication, and the right to decline medication, except a class one facility which employs staff authorized by the Ohio Revised Code to administer medication and when there is imminent risk of physical harm to self or others.
  - 10 The right to be free from restraint or seclusion unless there is imminent risk of physical harm to self or others.
  - 11 The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit a facility from using closed-circuit monitoring to observe seclusion rooms or other areas in the facility, other than bathrooms or sleeping areas, or other areas where privacy is reasonably expected, e.g. a medical examination room.

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- 12 The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of resident information under state and federal laws and regulations.
- 13 The right to have access to one's own record unless access to certain information is restricted for clear treatment reasons. If access is restricted, a treatment/ service plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment/service being offered to remove the restriction.
- 14 The right to be informed of one's own condition
- 15 The right not to be discriminated against on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental disability, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws.
16. The right to practice a religion of his or her choice or to abstain from the practice of religion.
17. The right to be informed in writing of the rates charged by the facility as well as any additional charges, and to receive thirty days' notice in writing of any change in the rates and charges
- 18 The right to reside in a class one residential facility, as available and appropriate to the type of care or services that the facility is licensed to provide, regardless of previous residency, unless there is a valid and specific necessity which precludes such residency. This necessity shall be documented and explained to the prospective resident.
- 19 The right to continued residency unless the facility is no longer able to meet the resident's care needs; the resident presents a documented danger to other residents, staff or visitors; or the monthly charges have not been paid for more than thirty days
- 20 The right not to be locked out of the facility at any time.
- 21 The right of adult residents not to be locked in the facility at any time for any reason.
- 22 The right to consent to or refuse treatment or services, or if the resident has a legal custodian, the right to have the legal custodian make decisions about treatment and services for the resident.
- 23 The right to consult with an independent treatment specialist or legal counsel at one's own expense.
- 24 The right to communicate freely with and be visited without staff present at reasonable times by private counsel and, unless prior court restriction has been obtained, to communicate freely with and be visited at reasonable times by a personal physician, psychologist or other health care providers, except that employees of a board, a provider, personnel of the Ohio protection and advocacy system, or representatives of the state long-term-ombudsman program may visit at any time when permitted by the Revised Code.

The right to communicate includes receiving written communications, which may be opened and inspected by facility staff in the presence of the resident recipient so long as the communication is then not read by the staff and given immediately to the resident

- 25 The right to meet with staff from the Ohio department of mental health and addiction services in private
- 26 The right not to be deprived of any legal rights solely by reason of residence in the facility.
- 27 The right to personal property and possessions:
  - (a) The right of an adult resident to retain personal property and possessions.
  - (b) The right of a child resident to personal property and possessions in accordance with one's health and safety considerations, and developmental age, and as permitted by his/her parent or guardian.
28. The right of an adult resident to manage his/her own financial affairs, and to possess a reasonable sum of money.
- 29 The right to use the common areas of the facility; Adult residents shall have right of access to common areas at all times.
- 30 The right to engage in or refrain from engaging in activities
- 31 The right of an adult to engage in or refrain from engaging in cultural, social or community activities of the resident's own choosing in the facility and in the community.

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32. The right to meet or communicate with family or guardians, and visitors and guests:
- 32 The right of an adult:
  - To reasonable privacy and the freedom to meet with visitors and guests at reasonable hours.
  - To make and/or receive confidential phone calls, including free local calls.
  - To write or receive uncensored, unopened correspondence subject to the facility's rules regarding contraband.
- 33 The right to be free from conflicts of interest; no residential facility employee may be a resident's guardian, custodian, or representative with the exception of an employee that has a previously established legal relationship to a resident, e.g. parent, spouse or child if permitted by facility policy.

### **Grievance Procedures - Outpatient**

Our mission at HHC is to provide quality, cost-effective mental health and substance abuse services. If this is not your experience with receiving our services, we want to know about it. If you have any complaints about our services, or feel your client rights have not been respected, please let us know so we may correct the situation to lead to a better outcome for you. Your feedback is our best guide as to where we need to improve our services.

If you have a complaint, you may follow an informal or formal grievance procedure or both.

- A. If you have a complaint please discuss your concerns or complaint directly with the workforce member related to the difficulty. Our workforce wants to correct any problems. We feel in most instances, you will receive the promptest and most satisfactory result if you express your complaint directly to the responsible person. If this individual does not satisfactorily resolve the problem, contact that person's supervisor and ask them to look into the matter for you.
- B. The formal grievance procedure may be the route to go if other steps have not worked or are inappropriate for the nature of you complaint. In this procedure:
  1. Contact the agency Client Rights Officer (CRO) located in the county clinic where you receive services and request to file a grievance.
    - a. He/she will talk through the concern and see if through this conversation a resolution can be provided, if not;
    - b. He/she will provide you the opportunity to write out your grievance within the grievance form which can be obtained in person or via e-mail. Please complete and send this document. If you have problems with this document a time can be set to help you fill it out.
    - c. He/she will contact you within two working days to schedule a face-to-face appointment with you so that you may tell your story.
    - d. You may attend the meeting with the CRO alone or you may ask another willing person (for example, a friend or family member) to help you to tell your side of the story. If you wish, they may be involved in all stages of the grievance procedure with you.
    - e. At the appointment, the CRO will explain the grievance procedures and complete a form describing your grievance.
  2. The CRO will investigate any formal, written grievances within seven working days and take steps to resolve it no later than ten working days from the date the grievance was filed.
  3. If the CRO's efforts have not satisfactorily resolved your grievance you may request a hearing, to be held within five working days with the Chief Clinical Officer (CCO), an impartial agency decision maker. If the CCO is unavailable, another Officer will fulfill this function.
- C. If the grievance is with the CRO, you may follow the informal steps or contact the CRO's supervisor to file a formal grievance. In such cases, the supervisor will fulfill the functions of the CRO.
- D. External Grievance Options. In addition to complaining directly to us, clients may at any time contact any of the groups listed on the "External Grievance Options" sheet to register a complaint about the services or workforce of HHC. The CRO may advise you as to which groups might be most appropriate for your type of grievance. If we have your written consent to release information to this external body, we will provide all

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relevant information regarding the grievance, upon request, to any of the groups you ask to investigate your grievance.

### Grievance Procedures – Residential

#### A. Provision of Client's Rights

1. The HHC will explain and maintain documentation in the resident's record an explanation of rights to each person served prior to or when beginning residency.
2. In a crisis or emergency situation, HHC will verbally advise the resident of at least the immediately pertinent rights only, such as the right to consent to or to refuse the offered treatment and the consequences of that agreement or refusal. Full verbal explanation of the resident rights policy shall be provided at the first appropriate occasion, based upon the resident's functioning.
3. Explanations of rights shall be in a manner appropriate for the person's understanding.
4. All records will be maintained for a minimum of three years from resolution. The following will be maintained; Copy of the grievance, documentation reflecting process used and documentation of any extenuating circumstances for extending the time period for resolution beyond 20 days.

B. All HHC staff will be trained at new hire and annually on resident rights and grievance procedure and documentation of this training will be kept in the employees file.

#### C. Grievance Procedure:

1. The agency gives the Client Rights Officer full support to take all necessary steps to assure compliance with all Client Rights and Grievance Procedures and to assist the client in preparation and filing of a grievance. Hopewell Health Centers, Inc. maintains a second staff person trained to handle a client grievance in the case of staff absence or conflict of interest.
2. The Client Rights Officer is responsible to be promptly accessible to clients and others articulating a concern, grievance, or complaint; to accept and oversee the process of any grievance filed by a client or on behalf of a client; to represent that client at any resulting hearing(s) if requested by the client; and to otherwise assure compliance with Client Rights and Grievance Procedures.
3. If the Client Rights Officer is the subject of the grievance, or is unavailable, the Chief Clinical Officer will designate an alternative person to act as Client Rights Officer. This alternate shall exercise all responsibilities listed in this policy.
4. The Client Rights Officer shall assure the keeping of records of grievance filed, the subject matter of the grievance, and resolutions of the grievances. These records will be available for review by the Mental Health Board, Ohio Department of Mental Health, Ohio Department of Alcohol and Drug Addiction Services, or other designated entities upon request. These records will be maintained for at least three (3) years.
5. Filing a grievance will not result in retaliation or barriers to service.
6. The process and steps which shall be followed in case of an alleged violation of Client Rights are as follows.
  - a. Step One – The client or client representative shall report the complaint to the Client Rights Officer or to agency staff persons at the work site or clinic where the alleged violation took place. The staff receiving the complaint will refer the client to the Client Rights Officer within one (1) working day of the complaint using the Referral Form (attached). If the Client Rights Officer is unavailable or is the subject of the grievance, notification shall be given to the Chief Clinical Officer.

Prompt consideration shall be given to the resolution of any complaint which involves a violation of Client Rights. The CRO will contact the client by phone or in person to discuss the complaint and determine if the client wants to file a written grievance..

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If the client does decide to pursue a written grievance, the CRO will provide the client with a copy of the Client Grievance Form by mail or in person, and help the client complete the form if requested and will provide the client with written acknowledgement of the grievance within 3 business days from receipt of the grievance. This notification will include 1) Date Received, 2) Summary of grievance, 3) Overview of grievance investigation process, 4) Timetable for completion, 5) Treatment Provider name, address and phone number. If a client writes a grievance on their own, it can be turned in to any staff persons at the work site, who are trained to deliver it to the CRO.

All grievances must be in writing and must include the date, time and description of the incident/situation and names(s) of person(s) involved, name of person to whom the grievance is to be given, and be signed and dated by the resident. The grievance may be made verbally to the clients’ rights officer, who then is responsible for preparing the written text of the grievance. In the absence of a resident’s signature, there must be an attestation by the clients rights officer that the written grievance is a true and accurate representation of the resident’s grievance. While grievances may not be made anonymously, a client may submit one anonymously by contact the CRO for their site by telephone at the number listed on page 4 of this document.

The client will also be informed of the right to file a complaint with outside entities as listed in the Client Handbook.

Once the written grievance is received, the CRO or designee investigates the grievance and attempts to resolve the grievance within 5 working days from the date the written grievance is received. A written statement of the results of the CRO’s investigation shall be given to the client using the Client Grievance Form, or to the grievant if other than the client, with the client’s written permission. The agency’s Authorization for Release of Information shall be used to document the client’s permission to release the result.

If this resolves the grievance to the client’s satisfaction, the CRO obtains the client’s signature on p. 2 of the Grievance Form.

**b. Step Two** – If the complaint is not resolved at Step One, the client signs the last section of the Grievance Form, and the Client Rights Officer will refer the grievance to the Executive Director. The Executive Director will investigate the grievance, which may include a meeting with the grievant and/or the grievant’s representative and/or the CRO to discuss the grievance.

1. If the grievance is resolved, a written statement of the results shall be given to the client or to the grievant if other than the client, with the client’s permission.
2. If resolution is not reached, the client shall be advised in writing of the finding and referred to outside resources. The agency Authorization of Release of Information shall be used to document client’s permission to release the results.
3. Hopewell Health Centers will observe a time line not to exceed twenty (20) working days from date of filing.

**External Grievance Options and Contact Information**

ADAMHS (317) Board of Athens, Hocking and Vinton Counties PO Box 130, Athens, Ohio 45701 740-593-3177	Ohio Dept. of Job & Family Services 30 E. Broad St, 32 <sup>nd</sup> Floor Columbus, OH 43266 614-466-6282 TTY: 614-752-3951 <a href="http://www.state.oh.us/odjfs">www.state.oh.us/odjfs</a>	US Dept. of Social Security – Inquiries 6401 Security Blvd., Room 4-C-5 Annex Baltimore, MD 21235 800-772-1213 TTY: 800-325-0778
Disability Rights of Ohio 200 Civic Center Drive, Suite 300 Columbus, OH 43215 614-466-7264 or 1-800-282-9181	Ohio Counselor, Social Worker, MFT Bd. 50 W. Broad St., Suite 1425 Columbus, OH 43215 614-466-0912	Ohio Dept. of Mental Health and Addiction Services- advocacy 30 E. Broad St., 8 <sup>th</sup> Floor Columbus, OH 43215 877-275-6364

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<a href="http://www.disabilityrightsohio.org">www.disabilityrightsohio.org</a>	<a href="http://www.cswmft.ohio.gov">www.cswmft.ohio.gov</a>	<a href="http://mha.ohio.gov">http://mha.ohio.gov</a>
Ohio Department of Health, Complaints 246 N. High Street, 3 <sup>rd</sup> Floor Columbus, OH 43215 1-800-342-0553 614-752-6490 TTY Home health hotline 1-800-669-3534	Ohio State Board of Psychology 77 South High St., 17 <sup>th</sup> Floor Columbus, OH 43266 614-466-8808 <a href="http://www.state.oh.us/psy/">www.state.oh.us/psy/</a>	State Medical Board of Ohio 30 E. Broad St, 3 <sup>rd</sup> Floor Columbus, OH 43215 614-466-3934 <a href="http://www.state.oh.us/med">www.state.oh.us/med</a>
Ohio Board of Nursing 17 South High Street, Suite 400 Columbus, OH 43215 614-466-3947 <a href="http://www.state.oh.us/nur">www.state.oh.us/nur</a>	US Equal Employment Opp Com. (EEOC) 1801 L. Street, NW, Room 9024 Washington, DC, 20507 800-669-4000 TTY: 202-663-4494 <a href="http://www.eeoc.gov">www.eeoc.gov</a>	Americans w/ Disabilities Act/Ohio ADA 1640 Roosevelt Drive Chicago, IL 60608, Phone 800-949-4232 TTY 800-232-2321 <a href="http://www.ada.ohio.org">www.ada.ohio.org</a>
Attorney General of Ohio – Fraud Unit 88 E. Broad St 10 <sup>th</sup> Floor Columbus, OH 43215 614-466-3402 <a href="http://www.ag.state.oh.us">www.ag.state.oh.us</a>	EEOC Cleveland Office 1240 E. 9 <sup>th</sup> Street Cleveland, OH 44199 216-522-2001	President’s Committee on Employment of People with Disabilities <a href="http://www.pcepd.gov">www.pcepd.gov</a> 1331 F St., NW, Suite 300 Washington, DC 20004 202-376-6200
Ohio Fed. for Children’s Mental Health 1225 Dublin Road Ste 125 Cincinnati, OH 43215 614-224-2700 <a href="mailto:OFFCMH@hotmail.com">OFFCMH@hotmail.com</a>	Ohio Gov’s Council on Disabilities 400 E. Campus View Blvd. Columbus, OH 43235 614-438-1200 TTY 800-282-4536x1391 <a href="http://www.state.oh.us/gcpd">www.state.oh.us/gcpd</a>	US Dept. of Justice, ADA, Civil Rights Box 66118 Washington, DC 20035 800-514-0301 TTY: 800-514-0383 <a href="http://www.usdoj.gov/crt/ada/adahom1.htm">www.usdoj.gov/crt/ada/adahom1.htm</a>
Ohio Psychiatric Association 1350 W. 5 <sup>th</sup> Ave., Ste 218 Columbus, OH 43212 614-481-7555	US Health & Human Services, Office for Civil Rights: Region V 233 North Michigan Avenue, Suite 240 Chicago, IL 60601 1-800-368-1019	NAMI Ohio 1225 Dublin Road Ste 110 Columbus, OH 43215 614-501-6264 <a href="http://www.namiohio.org">www.namiohio.org</a>
Ohio Civil Right Commission 30 East Broad St., 5 <sup>th</sup> Floor Columbus, OH 43205 800-278-7101	US Dept. of Medicare 6401 Security Blvd. Baltimore MD 21235 800-772-1213 <a href="http://www.medicare.gov">www.medicare.gov</a>	Ohio Advocates for Mental Health 1110 chambers road Columbus, OH 43212 800-888-8912

**If your rights/services have been restricted:** Please be aware that any restrictions are done to protect clients and workforce members and to ensure that treatment is helpful and appropriate. As indicated, if any of your rights or services are restricted, you have the right to be told why, and this is to be entered in your ISP. If you wish to regain restricted rights or services, a clear plan should be developed with you and entered into your file indicating what behaviors you need to display or what conditions need to occur in what timeline for the rights/services to be restored.

**Input on quality of care, achievement of outcomes and satisfaction with services.**

Satisfaction surveys are completed on a voluntary and anonymous basis without reprisal in any form. Persons receiving HHC services may complete Client Satisfaction Survey forms available once a year. Community Satisfaction Surveys are mailed annually to referral sources and other community stakeholders. Periodic focus groups have been held to gather input on specific topics.

**Outpatient Responsibilities and Situations When Services May be Discharged**

1. This agency expects clients to attend and actively participate in all scheduled sessions to create a behavior change. If unable to attend, clients must call at least 24 hours before appointment to reschedule. Absenteeism (excused or unexcused) may result in discharge from services or activation of daily call-in to obtain appointments. Such action may occur if two scheduled appointments are missed in a three-month period. Anyone discharged for noncompliance will not be able to schedule another intake appointment for 6 months (or as per conditions for reinstatement), but crisis services may be accessed at any time in case of emergency.
2. Treatment will end if: a) Treatment goals are met and the desired outcome has been reached; b) The service provider and the client agree treatment is no longer relevant; c) The client demonstrates lack of motivation or interest in treatment by missing two or more appointments in a three month period; d) The client has not rescheduled a missed appointment in three months or within the amount of time specified in a re-engagement letter; e) Failure to actively participate in the development of the Individualized Service Plan as scheduled.
3. To reopen a discharged case and reactivate services a person must repeat the intake process.

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4. Termination is when a client is not allowed to return to HHC for services. This may occur when a client threatens legal action against HHC employees; for threatening behavior or any implication of harm to any HHC staff member; forging/altering/falsifying any HHC document or Medical Record
5. In the case of life-threatening emergency situations HHC Crisis Intervention Team (CIT) may serve any individual who has been discharged or terminated. CIT may be contacted through our county clinics during office hours or through Crisis services after hours (numbers on front page of handbook).

### **Other Agency Policies Affecting Clients**

1. The following behaviors committed in agency vehicles, parking lots and facilities may be grounds for restriction of privileges, rights and services, discharge, termination and/or criminal prosecution: Any form of violence (verbal, sexual, physical) to any person, possession of illicit drugs or alcohol, possession of weapons, and the destruction of property. Legal prescription and over the counter drugs may be brought on premises, but may not be misused or abused.
2. The agency expects clients to attend all treatment sessions “straight/sober”. Attending sessions “under the influence” may be grounds for restriction of privileges, rights, and services, or discharge. HHC workforce members may not transport persons they believe are under the influence. Persons believed to be under the influence at agency facilities will be given the opportunity to call someone to pick them up; if they leave the facility driving a vehicle, law enforcement will be notified.
3. Agency facilities and vehicles are tobacco free. No smoking is permitted within 20 feet of any building access.
4. Seclusion and restraint are not used on adults. Workforce members trained in the safe and appropriate use of restraint may use these techniques as a last resort if a child or adolescent represents a danger to self or others and may use enforced time out as the only form of seclusion.

### **HHC Code of Conduct**

HHC has established a Code of Conduct for all its workforce members. Workforce members are expected to follow this Code of Conduct at all times. Examples of behaviors that are promoted in this code include: making sound, ethical decisions; treating other with respect and dignity; avoiding conflicts of interest; respecting our clients’ confidentiality and refraining from wasteful or fraudulent acts. If at any time, you are concerned about the behavior of one of HHC’s workforce members, please feel free to voice your concerns to a supervisor or the Client Rights Officer in the county where you are served

### **Declaration for Mental Health Treatment (“Psychiatric Advance Directive”)**

Declaration for Mental Health Treatment (DMHT) is a legal document signed into law in July 2003. It empowers you to name a proxy (a trusted friend or family member) to make mental health care decisions when an attending physician or primary service provider determines you have lost the capacity to make informed healthcare decisions for yourself. Many people with a history of mental illness live in fear of what will happen if they lose the ability to make health care decisions. When you develop a DMHT, you choose the person you want to act on your behalf in a proactive manner. DMHT may include instructions to your proxy as to what you want done, who you wish to see or not see, where you want to go for treatment and other important issues related to treatment such as choices of medications you may or may not want to take, kinds of treatment you want or do not want, choices about discharge plans, choices about the temporary care of children, pets and plants, and who should be notified. Hopewell staff will include this document in your record and team members will have access to it. If you need help in creating a DMHT Hopewell staff will provide resources.

### **Physical Health Information**

The Ohio Department of Mental Health requires this agency to gather health history information in order for your service provider to develop a thorough Individual Service Plan. If you have not had a physical exam during the past year, a physical is recommended. If you do not have a healthcare provider or dentist, please choose one, or if you need assistance with this, your service provider will help you locate one.

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**Summary of Federal Laws and Regulations Protecting the Confidentiality of Records of Alcohol and Drug Abuse Clients**

USC 290 42 CFR Part 2, 42 USC 290 DD 3 and 42, USC 290EE

1. Federal law and regulations protect confidentiality of alcohol and drug abuse client records maintained by this program. The program will not convey to a person outside the program that a client attends or receives services from the program or disclose any information identifying the client as an alcohol or drug abuser unless one or more of the following conditions exists: a) The client consents in writing; b) The disclosure is allowed by a court order; c) The disclosure is made to medical personnel in a medical emergency; d) The disclosure is made to qualified personnel or research, audit or program evaluation; e) The client is a physical threat to him/herself or to someone else.
2. Violation of the federal law and regulations by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with federal regulations.
3. Federal law and regulations do not protect any information about a crime committed by a client, either at the program or against any person who works for the program, or about any threat to commit such a crime.
4. Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

**Client and Family-Centered Recovery and Empowerment Model of Treatment**

HHC utilizes a Client and Family centered recovery and empowerment model for the delivery of mental health and substance abuse services. HHC workforce provides encouragement, hope and professional services to clients with their journey on the road of recovery. This model indicates that clients function optimally when service providers, family members, significant others and the community provide and support services consistent with evidence-based practices and result in the attainment of successful treatment outcomes. The client and his/her family/significant others are viewed as members of the treatment team, and the client is the director of his/her treatment. Treatment planning is done with the person and not for the person. Services are individualized to meet the needs of each client. Wherever the person is on the road to recovery is where the service provider starts.

<b>Community Resources and Support Groups</b>
<b>Adult Career Center</b> , 15676 State rt. 691, Nelsonville, OH 45764, (740) 753-3511. Provides training for adults.
<b>Aids Hotline in Ohio</b> 1-800-332-AIDS <b>Athens AIDS Taskforce</b> (740)-592-4397. Provide counseling, education, advocacy, support groups.
<b>Alcohol, Drug Addiction and Mental Health Services Board for Athens, Hocking and Vinton Counties</b> (ADAMHS or 317 Board) (740) 593-3177, Dairy Lane, Athens OH 45701,
<b>Alcoholics Anonymous (AA), Adult Children of Alcoholics (ACOA), Narcotics Anonymous (NA), Ala-Teen, Al-Anon, Nicotine Anonymous.</b> Consumer run support groups available throughout the week. Check local papers for times and locations. AA Athens County: 1-800-242-1729. <a href="mailto:alcoholics@frogned.net">alcoholics@frogned.net</a>
<b>Alzheimer’s Disease Support Group</b> - Hotline (800) 272-3900
<b>American Liver Foundation, Ohio Chapter</b> , 6133 Rockside Road, Suite 301, Independence OH 44131 800-HEP-OHIO; <a href="http://www.liverfoundation.org">www.liverfoundation.org</a> Provides information regarding liver diseases, eg., hepatitis.
<b>American Red Cross</b> Athens (740) 593-5273, Hocking (740) 385-3536, Vinton (740) 286-1643
<b>Appalachian Behavioral Healthcare (ABH)</b> , State psychiatric hospital, 100 Hospital Drive, Athens, OH 45701 (740) 594-5000.
<b>Appalachian Community Visiting Nurses and Hospice Health Services</b> (740)-594-8226 ext 405
<b>Appalachian People’s Action Coalition (APAC)</b> , 5371 State St., Albany, OH 45710
<b>Area Agency on Aging</b> Buckeye Hills Regional Council 1-800-833-0830
<b>Athens City Transit (ACT)</b> , (740) 592-2727 Residents of Athens City and The Plains may use ACT to get to and from HHC appointments. When exiting the bus at HHC, ask the driver to pick you up there on their next round.
<b>Bereavement</b> – classes and information provided by Hospice (740) 594-8226

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<b>Bureau of Services for the Visually Impaired</b> (740) 592-4411
<b>Bureau of Vocational Rehabilitation (BVR)</b> Athens (740) 592-4411
<b>Centers for Disease Control and Prevention (CDC)</b> Hepatitis branch – 1-800-232-4636
<b>Central Ohio Diabetes Association</b> (740) 592-8226 1-800-422-7946
<b>Child Support</b> - Establishes, enforces, collects and administers child support Athens Co. (740) 593-5046 or (740) 797-2177 Hocking Co. (740) 385-4168
<b>Children Services</b> Athens (740) 592-3061 Hocking (740) 385-4168 Vinton (740) 672-2250
<b>Community Action</b> Athens (740) 767-4500 Hocking (740) 385-6813 Vinton (740) 384-5119
<b>Consumer Credit Counseling</b> (866) 481-4752
<b>Cooperative Extension Service</b> Athens (740) 593-8555 Hocking (740) 385-3222 Vinton (740) 596-5212
<b>Family Support Group</b> – at Appalachian Behavioral Healthcare (740) 594-5000 or 1-800-372-8862
<b>Fibromyalgia Support Group</b> – Suzanne Greif (740) 985-3422
<b>Gathering Place</b> Consumer run drop-in center, 7 N. Congress, Athens (740) 594-7337
<b>George E. Hill Center for Counseling</b> (740) 593-4425 Sliding scale for community; free for OU students
<b>Good Works</b> – Homeless shelter in Athens. (740) 594-3333
<b>Health Department</b> Athens (740) 592-4431 Hocking (740) 380-3030 Vinton (740) 596-5233. Vaccines and immunizations provided at little or no cost. Birth certificates.
<b>Health Recovery Services (HRS)</b> Substance abuse prevention, outpatient and inpatient services Athens (740) 592-6720 Hocking (740) 385-9895 Vinton 1-800-645-8287
<b>Hocking Valley Community Hospital</b> - Logan (740) 380-8000
<b>Home Away From Home</b> – consumer run drop-in center, 56 N. Walnut St., Logan (740)-380-2052 Brenda Huffer
<b>Hospice of Appalachia</b> – grief counseling and support to terminally ill patients and their families. Athens (740) 594-8826
<b>Job and Family Services</b> Athens Co. (740) 592-4477, 1-800-338-4484 Hocking Co. (740) 385-5663 Vinton Co. (740) 596-2584
<b>LeLeche League</b> - breast feeding education and support group. (740) 707-2519. Cassie
<b>Mental Health Crisis Services</b> – 1-888-475-8484 or 1-800-252-5554 National suicide prevention Lifeline – 1-800-273-8255 or <b>988</b> Crisis Text line – text HOME to 741741
<b>Developmental Disabilities Board</b> Athens (740)594-3539 Hocking (740) 385-6805 Vinton (740) 596-5515
<b>Metropolitan Housing Authority</b> Administers HUD(subsidized) housing, processes applications. Athens (740) 592-4481 Hocking (740) 385-3883 Vinton (740) 596-5963
<b>My Sister's Place</b> Domestic violence shelter, counseling and advocacy. Hotline 1-800-443-3402
<b>National Association on Mentally Illness (NAMI)</b> <a href="http://www.nami.org">www.nami.org</a>
<b>NAMI Athens</b> (740) 593-7424 or 594-5000, extension 4114. Located at Appalachian Behavioral Healthcare, 100 Hospital Drive, Athens.
<b>New to You Thrift Shoppe</b> 90 Columbus Road, Athens. (740) 592-1842 Resale clothing, household items, books, toys.
<b>O'Bleness Memorial Hospital</b> Athens (740) 593-5551
<b>Ohio Advocates for Mental Health</b> Columbus 1-614-888-8912 Educating public officials and the community about mental illness and the needs of those affected by it. Advocacy with and for people with psychiatric disabilities.
<b>Planned Parenthood of Southeast Ohio</b> Family planning, reproductive healthcare, anonymous HIV testing and counseling. Athens (740) 593-6979
<b>Poison Control Center</b> 1-800-222-1222
<b>Police Departments:</b> Emergency (all): 911 Athens City 593-6606, Athens Sheriff 593-6633; Logan City 385-6866, Hocking Sheriff 385-2131; Vinton Sheriff 596-5242; Ohio St. Highway Patrol: Athens 593-6611 Hocking 385-1668
<b>Rural Action</b> All counties: (740) 767-4938
<b>Salvation Army</b> (740) 797-1305
<b>Shepherd's House</b> –Vinton Co. domestic violence shelter (740) 596-9271
<b>Social Security Administration</b> Athens (877) 840-7683 Hocking and Vinton 1-800-772-1213
<b>Southeast Ohio Legal Services</b> Legal services for limited civil cases, domestic violence, divorce, eviction and welfare. 1-800-686-3668
<b>Special Education Parent Advocacy Network (SEPAN)</b> (614)-699-3273 Provides support to children with

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disabilities and their families. Will attend IEP and other educational meeting with parents.	
<b>TASC of Southeast Ohio</b> Athens 740-594-2276 Hocking 740-380-1714 Vinton 740-596-5973 substance abuse treatment	
<b>Veterans Services</b> Athens 740-592-3216 Hocking 740-385-7507 Vinton 740-596-5307	
<b>Victim Assistance</b> Athens 740-592-3212 Hocking 740-385-5242	
<b>WIC</b> Athens (740) 677-4002 Hocking (740) 385-6621 Vinton (740) 596-4171 Perry (740) 342-4938	
<b>Widow/Widower Support Group</b> (740) 592-9337 Alice Hartman	
<b>TRANSPORTATION SERVICES</b>	
<b>Athens Transit</b> (740) 592-2727	
<b>Athens on Demand</b> (740) 597-2404	
<b>Day Break</b> (740) 596-2303	
<b>Ahoy Transportation</b> (740) 596-0536	
<b>Carealot Transportation</b> (740) 577-4467	
<b>Jackson Transportation</b> (740) 288-2091	
<b>RSVP</b> (740) 594-8499	

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